

SHORE MARINER APPLICATION FOR SALE

Checklist for owners and to provide to prospective owners and realtors.

SALES:

- () Intent to Sell form to be sent to Shore Mariner Management (submitted 30 days prior)
- () Fully completed application to be sent to Shore Mariner Management (submitted 20 days prior)
- () Advise of the \$150 fee (per applicant or married couple) that includes management processing fee and background checks per adult 18+
- () Current copy of Rules and Regulations
- () Purchase agreement
- () Interview/Orientation with the Association _____ date

() Open house policy:

Open Houses are allowed with prior notice to Management. Owners or real estate agents are to meet prospective buyers at the ground floor lobby entrance doors, register them in guest book located there and escort them to and from the open house unit(s), recreation facilities, restrooms, pool/pool area and other interior and exterior common areas. At no time are prospective buyers to be left alone while in the building or within the pool area. (See SM Rules and Regulations 3.6)

OTHER DOCUMENTS TO PROVIDE OR REFERENCE AS AVAILABLE ON SHOREMARINER.ORG

Condominium Governance Form

FAQ document

Specific Condo Documents:

Bylaws

Amendments

Articles of Incorporation

Milestone and Structural Integrity Reserve Study

Prior year financials (audited if possible)

Current year budget and YTD financial statement

Shore Mariner Condominium Association, Inc.
Application for Sale

Application fee of \$150.00 for all Sales: made payable to Shore Mariner Condo Association Inc.
Please provide a copy of the purchase contract.

Unit # _____ Parking Space #(s) _____

I/We, _____ and _____,
Prospective Buyer(s) at Shore Mariner Condominium Association, Inc. that is currently owned by
_____, hereby allow the property owner/property manager to inquire into
my/our credit file, criminal, and civil history to obtain information.

I/We understand that on my/our credit file it will appear that TENANT CHECK has made an inquiry.
I/We cannot claim any invasion of privacy against them now or in the future.

Signature _____ Signature _____

Applicant's Information:

Full Name _____ Phone _____
Driver License: _____ Birth Date: _____ Email _____
To receive Association Correspondence via email, initial here: _____
Present Address: _____
How long: _____ Rent: Y / N Landlord Name and Phone: _____

Co-Applicant's Information:

Full Name _____ Phone _____
Driver License: _____ Birth Date: _____ Email _____
To receive Association Correspondence via email, initial here: _____
Present Address: _____
How long: _____ Rent: Y / N Landlord Name and Phone: _____

Check your intended use for this unit: () Full Time Resident () Second Home () Rental

References:

Name Phone Date

Name Phone Date

Names and ages of person(s) occupying the Unit:

Many Associations have restrictions on the number of individuals occupying a unit. Please check the Association by-laws to ensure that you will be in compliance.

Name Age Name Age

Name Age Name Age

Vehicle Information:

Many Associations have restriction on different types and number of Vehicles, please review the Association's By-Laws to ensure that you will be in compliance, please be aware that any vehicles restricted by the By-Laws of the Association can be towed at the owner's expense.

Make / Model License Number

Make / Model License Number

Pet Disclosure: Will a pet be at Shore Mariner? Check: () Yes () No

If yes, please review the SMCA Pet Policy re pet requirements and policies.

If yes: pet type _____ pet height _____ Pet weight _____

Corporate record information and other matters related to the Association

Florida Statutes requires the Association to maintain a current roster of owners and occupant of the complex. The purpose of this section of the application is to update the corporate record of the Association.

Mailing address if different than property address for matters related to the Condominium:

Shore Mariner Condominium Association, Inc.
Sale Approval Form

Unit #: _____

In case of emergency, Please notify: _____

Please return this completed application to:
Shore Mariner Condominium Association, Inc.
C/O Ameritech Community Management
24701 US Highway 19 North, Suite 102, Clearwater Fl., 33763
Attn: Rosie Maisonet LCAM
Ofc: 727-726-8000 Ext. 356
Email: Rmaisonet@ameritechmail.com

Documents & Agreement:

I/We have received and read the Condominium _____ Rules and Regulations, _____ Declaration of Condominiums, _____ Articles of Incorporation and _____ By-Laws (sales) and I/We agree to abide by same.

Applicant

Co-Applicant

Date submitted: _____

The purchaser is required to submit a completed application to Shore Mariner Condominium Association Board for review at least 20 days prior to the scheduled closing of the sale.

Association Use Only:

() Approved () Disapproved

By: _____

BACKGROUND INFORMATION FORM

DATE: _____

I/We _____, prospective buyer(s)
for the property located at _____

Managed By: _____ Owned By: _____

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I/We understand that on my/ ur credit file it will appear the TENANT CHECK has made an inquiry. I/We cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

| INFORMATION | SPOUSE/ROOMMATE |
|---|--|
| SINGLE ___ MARRIED ___ | SINGLE ___ MARRIED ___ |
| SOCIAL SECURITY #: _____ | SOCIAL SECURITY #: _____ |
| FULL NAME: _____ | FULL NAME: _____ |
| DATE OF BIRTH: _____ | DATE OF BIRTH: _____ |
| DRIVER LICENSE #: _____ | DRIVER LICENSE #: _____ |
| CURRENT ADDRESS: _____ _____ HOW LONG? _____ | CURRENT ADDRESS: _____ _____ HOW LONG? _____ |
| LANDLORD & PHONE: _____ _____ | LANDLORD & PHONE: _____ _____ |
| PREVIOUS ADDRESS: _____ _____ HOW LONG? _____ | PREVIOUS ADDRESS: _____ _____ HOW LONG? _____ |
| EMPLOYER: _____ | EMPLOYER: _____ |
| OCCUPATION: _____ | OCCUPATION: _____ |
| GROSS MONTHLY INCOME: _____ | GROSS MONTHLY INCOME: _____ |
| LENGTH OF EMPLOYMENT: _____ | LENGTH OF EMPLOYMENT: _____ |
| WORK PHONE NUMBER: _____ | WORK PHONE NUMBER: _____ |
| HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO | HAVE YOU EVER BEEN ARRESTED?: (CIRCLE ONE) YES NO |
| HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO | HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO |
| SIGNATURE: _____ | SIGNATURE: _____ |
| Phone _____ | Phone _____ |